

Form No. 10. MARGIN RESERVED FOR INDEXING. WHITE PLAINLY, WITH ENFOLDING ENK—THIS IS A PERMANENT RECORD. N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH  
 County of Greenville STATE OF SOUTH CAROLINA.  
 Bureau of Vital Statistics  
 State Board of Health  
 Township of \_\_\_\_\_  
 or  
 Inc. Town of Branchville Registration District No. 3601 Registered No. 5  
 or  
 City of \_\_\_\_\_ (No. \_\_\_\_\_ St.; \_\_\_\_\_ Ward)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

File No.—For State Registrar Only  
47029

2) Full Name of Child Estell Pitts { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? \_\_\_\_\_ (5) Number in order of birth \_\_\_\_\_ (6) Are Parents Married? \_\_\_\_\_ (7) DATE OF BIRTH May 15 1916  
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.  
 (8) FULL NAME William Pitts  
 (9) PRESENT POSTOFFICE OF FATHER Branchville  
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 39 (Years)  
 (12) BIRTHPLACE Greenwood SC  
 (13) OCCUPATION Farm  
 (20) Number of children born to mother, including present birth 5

MOTHER.  
 (14) NAME BEFORE MARRIAGE Sue Chappell  
 (15) PRESENT POSTOFFICE OF MOTHER Branchville SC  
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 34 (Years)  
 (18) BIRTHPLACE Greenwood SC  
 (19) OCCUPATION Housewife  
 (21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Born alive at \_\_\_\_\_ N., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Lottie Stephens  
 (24) State whether Physician or Midwife | (25) Address of Physician or Midwife

Given name added from a supplemental report  
 \_\_\_\_\_, 191\_\_\_\_  
 \_\_\_\_\_ Registrar

Midwife | Branchville SC  
 (26) Witness Wester Ott  
 (Signature of Witness necessary only when question 23 is signed by mark)  
 (27) Filed May 20 1916 (28) Wester Ott Local Registrar

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

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